

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N41781

FILED
Mar 10, 2010
Secretary of State

Entity Name: AMIKIDS ORLANDO, INC.

Current Principal Place of Business:

1461 S LAKE PLEASANT ROAD
APOPKA, FL 32703

New Principal Place of Business:

Current Mailing Address:

ASSOCIATED MARINE INSTITUTES
5915 BENJAMIN CENTER DR
TAMPA, FL 33634

New Mailing Address:

FEI Number: 59-3045041

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HULL, DAVID J
SMITH, HULSEY, & BUSEY
225 WATER STREET, SUITE 1800
JACKSONVILLE, FL 32202 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: C
Name: GANTT, LEON
Address: 1128 CELEBRATION BOULEVARD
City-St-Zip: CELEBRATION, FL 34747

Title: P
Name: SEDGWICK, DOUG
Address: 2503 STONEWOOD ESTATES LANE
City-St-Zip: ORLANDO, FL 32825

Title: D
Name: STANDER, O B
Address: 5915 BENJAMIN CTR DR
City-St-Zip: TAMPA, FL 33634

Title: D
Name: DALLAS, BRENDA
Address: 941 OCEAN CIRCLE
City-St-Zip: DAVENPORT, FL 33897

Title: D
Name: HESS, GENE
Address: 1841 LAKE BALDWIN LANE
City-St-Zip: ORLANDO, FL 32814

Title: D
Name: PELLEGRINI, LINDA
Address: 5728 MAJOR BOULEVARD, SUITE 176
City-St-Zip: ORLANDO, FL 32819

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: O.B. STANDER

D

03/10/2010

Electronic Signature of Signing Officer or Director

Date